OTPE COLUMN SOLUMN SOLU

PTC/SECISA (08-07)
Approved for use through 19/31/2002 OUB 0651-0031
U.S. Peters and Trademant Office: U.S. CEPARTIMENT OF COMMERCE

U.S. Payers and Trademant Office: U.S. CEPARTMENT OF COMMERCE.
Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information underse it displays a valid CMB control number.

ubalitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary Sheet 1 of 2

eficeed@copec
0

Examiner Initials			iment Kind Code ^r (# knawn)	Name of Patentae or Applicant of Cited Document	Date of Publication of Cited Document	Pages, Columns, Lines, where relevant passages or relevant figures appear
טמ		4.373,224		Shinji Bandai, et. al.	02-15-1983	
in .		4,935,158		Asaman, et al.	06/19/1890	
# ~ V						

IOP SOCIODO PARAMENTO COMPANIO DE CONTROCTO		TO THE RESERVE TO THE	***************************************	
Examiner	· /	Date Considered	VIA Inches	
Signature (<u></u>	Considered	## 1/O1	
23thrama - r		CONSIDERO		

*EXAMPLER: Initial if reference confidence, whether or not citation is in conformance with MPEP 609. Draw tine through citation if not in conformance and not considered, include copy of this form with next communication to applicant.

I Unique obtation designation number: I See stached Kinds of U.S. Perent Documents, I Error Office that Issued the document, by the har-letter code (WIPO Standard ST. 3). I For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the senal number of the patent document, I find of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible, a Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark.

Office, Washington, DC 20231: DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

SUBMISSION UNDER MPEP 609 D

Application Number 09/503,262
Filing Date February 14, 2000
First Named Inventor Linda McMeekin
Group Art Unit 3751
Examiner Name David J. Walczak
Attorney Docket Number JBP-480

Page 1 of

		Page 1 of 1	Attorney Doc	ket Number	J8P-480
			PATENT DOCUMENTS		
Examiner	Cita	Name of Patentee or Applicant	U.S. Palent Document	U.S. Patent Document Kind Code ²	
initials	No.1	of Cited Document	Number	(if known)	where relevant passages or relevant figures appear
		FOREIG	N PATENT DOCUMENTS		
		Name of Palantae or	Foreign Patent Document		Columns, Lines, ilevant passages
Exeminer Initials	Cite No.	Applicant of Cited Document	Office ³ Number ⁴ Kind	Code ⁶ or rel	levant figures T
	,,,,				
		OTHER PRIOR ART. W	ON PATENT LITERATURE DO	CHMENTS	
Examiner	Cite	Include name of the author (in C.	APITOL LETTERS), title of	the article (when	appropriate), ate. page(s). T ²
's No.' volume-issue number(s), publisher, city and/or country where put		ntry where publish	ned		
Initials* سا (ر		Decision from ROC Intellectual Property	Office dated Merch 8, 2004 to	r Taiwan APPL, NO	90103188
					1

Examiner Signature		Date Constdered	8/200
	· · · · · · · · · · · · · · · · · · ·		

PTO/SB08A (08-00)
Approved for use through 10/31/2002 OMB 0651 0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMBACRCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to S0030 fulls for form: 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as neces Sheet 2 of 2

& connection or excessing ross resident	LE SE ASTRO COMO COMO URBIDAS
Application Number	09/503,262
Filing Date	February 14, 2000
First Named Inventor	Linda McMeekin
Group Art Unit	3751
Examiner Name	David J. Walczak
Altomey Docket Number	JBP-480
Ī	

OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate); title of the liem					
Examiner's Initipts*	Cite No.1	(book, magazine, journel, serial, symposium, catalog, etc.), dete, page(s), volume-issue number(s), publisher, city and/or country where published.	T²		
/)'/		GOLLNICK, H., "Topical Drug Treatment in Acre", Dematology, 196, 119-125 (1998)			

	*********		***************************************		
		N			

Examiner C	Date Considered \$\sqrt{3}/65
	Constant (1/)/ - 1

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Pakers and Trademark Office, Washington, DC 20231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

^{*}EXAMINER: Initial if reference considered, whistfier or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

I Unique citation designation number, a Applicant is to place a check mark here if English language Translation is attached